## JUVENILE LOCKUP LAWS & PROCEDURES

#### I. Status offenders can not be securely detained for any amount for time.

- Federal JJDP Act Section 223(a)(14)
- MGL Chapter 119, Section 39H; 28 CFR Part 31.303(f)(5)(iv)
- Status Offender = CHINS (runaways, stubborn child, habitual school offenders) and youth curfew violators. A minor under age 17 in possession of/transporting alcohol is considered a status offender under federal regulations. A child in protective custody, a non-offense, shall be accorded the same treatment as a status offender.
- Securely detained is defined as physically detained or confined in a locked room, set of rooms, or a cell that is designated, set aside or used for the purpose of securely detaining persons who are in law enforcement custody. Secure detention can result either from being placed in such a room or enclosure and/or from being physically secured to a stationary object such as a cuffing rail.

#### II. No Juvenile under the age of 14 may be held in a police lockup.

- MGL Chapter 119, Section 67, (Interpreted by: <u>Juvenile Procedures Manual for Police</u>, Office of the Attorney General, Part Six: Detention, Page 12-13. April 1996)
- III. Youth charged with delinquency offenses shall not be held in a police lockup or otherwise securely detained for any longer than six hours. (Only for purposes related to identification, processing, and releasing the offender to his/her parent(s)/guardian(s) or transporting the accused offender to court or an appropriate alternative lockup program.)
  - Federal JJDP Act Section 223(a)(14).
  - 28 CFR Part 31.303(d)(1)(i)

#### IV. Juveniles must be sight and sound separate from adults in custody.

- Federal JJPD Act Section 223(a)(13).
- MGL Chapter 119, Section 67.

PLEASE NOTE: Only juveniles detained securely should be included on the monthly <u>Juvenile</u> <u>Lockup</u> <u>Report</u>

#### Massachusetts Executive Office of Public Safety Al ternative Lockup Program Charge Sheet

#### SECURE ALTERNATIVE LOCKUP PROGRAM

Aggravated Assault Inciting a Riot Armed Robbery Indecent Assault

Arson (any fire / burning related crime) Indecent Assault & Battery

Assault & Battery **Kidnapping** 

Assault & Battery on a Police Officer Larceny of a Motor Vehicle Assault & Battery on a Public Official Lewd and Lascivious Conduct

Assault & Battery with a Dangerous Weapon Manslaughter

Attempted Murder Multiple Default Warrants (regardless of charges) Auto Theft Murder (under age 14 only)

Battery

Pos. of Controlled Substance (any class) w/ Intent to Dist. Breaking and Entering (Day or Night) Possession of a Deadly Weapon (firearms, knives, explosive devices)

Burglary Prostitution / Solicitation of Prostitution

Civil Rights / Hate Crimes Rape

Conspiring to Violate Drug Laws Resisting Arrest Carjacking Robbery (unarmed)

Sexual Assault Domestic Assault & Battery

Home Invasion Stalking

#### NON-SECURE ALTERNATIVE LOCKUP PROGRAM

STATUS OFFENDERS: any and all status offenders (Chins Warrants, Runaways, Stubborn Child, Truants, Youth Curfew Violators, or any other age related offense)

Assault Open Container / Public Consumption of Alcohol Breaking and Entering a Motor Vehicle Operating a Motor Vehicle without a License

Destruction of Property Possession of Ammunition Possession of Burglary Tools Disorderly Conduct

Disturbing the Peace Possession of Controlled Substance (All Classes)

Domestic Assault Possession of Dangerous Weapon (air rifles & other weapons)

Failure to Stop for a Police Officer Protective Custody Forgery / Counterfeiting Receiving Stolen Property Graffiti / Defacing Property Receiving Stolen Motor Vehicle

Harassment Runaway Intimidation of a Witness Shoplifting Trespassing Larceny (Over & Under \$250)

Unauthorized Use of Motor Vehicle Malicious Destruction of Property

Minor in Possession of Alcohol

- st In the event that the arresting agency finds itself needing to refer a juvenile to an ALP and feels strongly that the ALP designated by this charge sheet is not in the best interest of the juvenile and/or the ALP, the referring agency has the authority to supersede this charge sheet and refer the youth to the ALP (Secure/Non-Secure) that they deem is most appropriate.
- \* Unable to locate the charge? use the charge on the sheet that most closely resembles the charge against the Juvenile to determine placement.
- \* "Attempted" / "Conspiracy" / "Threats" charges to refer a juvenile charged with attempting or conspiring to commit a crime, use the crime that was attempted or conspired to determine placement of the juvenile.
- \* Warrants to place a juvenile arrested on a warrant, use the original charge in the warrant to determine placement.
- \* Violation of Probation use original charge to determine placement of juvenile.





### MONTHLY ALTERNATIVE LOCKUP PROGRAM-SECURE DATA FORM

This form reports data from: \_\_\_\_\_\_ and continues to: \_\_\_\_\_\_, Page \_\_\_ of \_\_\_.

| Please list below: 1) the date and exact time of intake, 2) the name or unique identification number of the juvenile, 3) the individual's date of birth, gender*, and race*, 4) the name of the referring PD or State Police barracks, 5) the offense(s)* with which the juvenile was charged (*see code listing), 6) the date and time released, and 7) the number of bed nights used by the juvenile. |      |         |                     |     |        |      |            |                  |              |          |            |
|---|------|---------|---------------------|-----|--------|------|------------|------------------|--------------|----------|------------|
|   | Date | In-Time | Juvenile's Name/ID# | DOB | Gender | Race | Offense(s) | Arresting Agency | Release Date | Out-Time | Bed Nights |
| 1   |      |         |                     |     |        |      |            |                  |              |          |            |
| 2   |      |         |                     |     |        |      |            |                  |              |          |            |
| 3   |      |         |                     |     |        |      |            |                  |              |          |            |
| 4   |      |         |                     |     |        |      |            |                  |              |          |            |
| 5   |      |         |                     |     |        |      |            |                  |              |          |            |
| 6   |      |         |                     |     |        |      |            |                  |              |          |            |
| 7   |      |         |                     |     |        |      |            |                  |              |          |            |
| 8   |      |         |                     |     |        |      |            |                  |              |          |            |
| <u> </u>  |      |         |                     |     |        |      |            |                  |              |          |            |
|   |      |         |                     |     |        |      |            |                  |              |          |            |

| Program Name:   | Overnight Arrest Unit ALP-Secu |
|-----------------|--------------------------------|
| Street Address: |                                |
| City/Zip Code:  |                                |

Capacity: ( ) male/female beds

Contact: , Program Director

Phone:

Please mail or fax this form to EOPS no later than Five (5) court/business days from the last day of each calendar month to:

Michael E. Russas, Juvenile Justice Compliance Monitor EOPS Programs Division One Ashburton Place, Suite 2110 Boston, Massachusetts 02108

Fax: (617) 727-5356 Phone: (617) 727-6300 ext. 25303

## OFFICE OF JUSTICE PROGRAMS OFFICE OF THE COMPTROLLER

# CERTIFICATIONS REGARDING LOBBYING; DEBARMENT, SUSPENSION AND OTHER RESPONSIBILITY MATTERS; AND DRUG-FREE WORKPLACE REQUIREMENTS

Applicants should refer to the regulations cited below to determine the certification to which they are required to attest. Applicants should also review the instruction for certification included in the regulations before completing this form. Signature of this form provides for compliance with certification requirements under 28 CFR Part 69, "New Restrictions on Lobbying" and 28 CFR Part 67, "Government-wide Debarment and Suspension (Non-procurement) and Government-wide Requirements for Drug-Free Workplace (Grants). "The certifications shall be treated as a material representation of fact upon which reliance will be placed when the Department of Justice determines to award the covered transaction, grant, or cooperative agreement.

#### 1. LOBBYING

As required by Section 1352, Title 31 of the U.S. Code, and implemented at 28 CFR Part 69, for persons entering into a grant or cooperative agreement over \$100,000, as defined at 28 CFR Part 69, the applicant certifies that:

- (a) No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any Federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal grant or cooperative agreement;
- (b) If any funds other that Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal grant or cooperative agreement, the undersigned shall complete and submit Standard Form LLL. "Disclosure of Lobbying Activ ities," in accordance with its instructions;
- (c) The undersigned shall require that the language of this certification be included in the award documents for all subawards at all tiers (including subgrants, contracts under grants and cooperative agreements, and subcontracts) and that all subrecipients shall certify and disclose accordingly.

# 2. DEBARMENT, SUSPENSION, AND OTHER RESPONSIBILITY MATTERS (DIRECT RECIPIENT)

As required by Executive Order 12549, Debarment and Suspension, and implemented at 28 CFR Part 67, for prospective participants in primary covered transactions, as defined at 28 CFR Part 67, Section 67.510—

- A. The applicant certifies that it and its principals:
- (a) Are not presently debarred, suspended, proposed for debarment,
- declared ineligible, sentenced to a denial of Federal benefits by a State or Federal court, or voluntarily excluded from covered transactions by any Federal department or agency;
- (b) Have not within a three-year period preceding this application been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State, or local) transaction or contract under a public transaction;

- violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
- (c) Are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State, or local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
- (d) Have not within a three-year period preceding this application had one or more public transactions (Federal, State, or local) terminated for cause or default; and
- B. Where the applicant is unable to certify to any of the statements in this certification, he or she shall attach an explanation to this application.

## 3. DRUG-FREE WORKPLACE (GRANTEES OTHER THAN INDIVIDUALS)

As required by the Drug-Free Workplace Act of 1988, and implemented at 28 CFR Part 67, Subpart F, for grantees, as defined at 28 CFR Part 67 Sections 67.615 and 67.620—

- A. The applicant certifies that it will or will continue to provide a drugfree workplace by:
- (a) Publishing a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the grantee's workplace and specifying the actions that will be taken against employees for violation of such prohibition;
- (b) Establishing an on-going drug-free awareness program to inform employees about—
- (1) The dangers of drug abuse in the workplace;
- (2) The grantee's policy of maintaining a drug-free workplace;
- (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
- (4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace;
- (c) Making it a requirement that each employee to be engaged in the performance of the grant be given a copy of the statement required by paragraph (a);
- (d) Notifying the employee in the statement required by paragraph (a) that, as a condition of employment under the grant, the employee will—

| .(1) Abide by the terms of the statement; and   |  |  |  |  |  |  |
|---|--|--|--|--|--|--|
| (2) Notify the employer in writing of his or her conviction for a violation of a criminal drug statute occurring in the workplace no later than five calendar days after such conviction;   | Check If there are workplaces on file that are not identified here.  Section 67, 630 of the regulations provides that a grantee that is a State may elect to make one certification in each Federal fiscal year. A copy of which should be included with each application for Department of Justice funding. States and State agencies may elect to use OJP Form 4061/7. |  |  |  |  |  |
| (e) Notifying the agency, in writing, within 10 calendar days after receiving notice under subparagraph (d)(2) from an employee or otherwise receiving actual notice of such conviction. Employers of convicted employees must provide notice, including position title, to: Department of Justice, Office of Justice Programs, ATTN: Control Desk, 633 Indiana Avenue, N.W., Washington, D.C. 20531. Notice shall include the identification number(s) of each affected grant; |  |  |  |  |  |  |
| (f) Taking one of the following actions, within 30 calendar days of receiving notice under subparagraph (d)(2), with respect to any employee who is so convicted—   | Check If the State has elected to complete OJP Form 4061/7.  |  |  |  |  |  |
| (1) Taking appropriate personnel action against such an employee, up to and including termination, consistent with the requirements of the Rehabilitation Act of 1973, as amended; or   | DRUG-FREE WORKPLACE (GRANTEES WHO ARE INDIVIDUALS)   |  |  |  |  |  |
| (2) Requiring such employee to participate satisfactorily in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State or local health, law enforcement, or other appropriate agency;  | As required by the Drug-Free Workplace Act of 1988, and implemented at 28 CFR Part 67, Subpart F, for grantees, as defined at 28 CFR Part 67; Sections 67.615 and 67.620—  A. As a condition of the grant, I certify that I will not engage in the   |  |  |  |  |  |
| (g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of paragraphs (a), (b), (c), (d), (e), and (f).   | unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in conduction any activity with the grant; and  B. If convicted of a criminal drug offense resulting from a violation   |  |  |  |  |  |
| B. The grantee may insert in the space provided below the site(s) for the performance of work done in connection with the specific grant:   | occurring during the conduct of any grant activity, I will report the conviction, in writing, within 10 calendar days of the conviction, to: Department of Justice, Office of Justice Programs, ATTN: Control Desk 633 Indiana Avenue, N.W., Washington, D.C. 20531.   |  |  |  |  |  |
|   |  |  |  |  |  |  |
| As the duty authorized representative of the applicant. I hereby certify that   | t the applicant will comply with the above c ertifications.  |  |  |  |  |  |
| 1. Grantee Name and Address:  |  |  |  |  |  |  |
|   | 3. Grantee IRS/Vendor Number   |  |  |  |  |  |
| 4. Typed Name and Title of Authorized Representative  |  |  |  |  |  |  |
| 5. Signature  | 6. Date  |  |  |  |  |  |
|   |  |  |  |  |  |  |